## 2006 FOR PROFIT CORPORATION

## FILED **ANNUAL REPORT** May 01, 2006 08:00 Al Secretary of State DQCUMENT # P93000088419 1. Entity Name BILANA, INC. Principal Place of Business Mailing Address 891 W COMMERCIAL BLVD 891 W COMMERCIAL BLVD FT LAUDERDALE, FL FT LAUDERDALE, FL CR2E034 (11/05) 03312006 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0456507 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALEXOPOULOS, LANA DO NOT WRITE 891 W COMMERCIAL BLVD FORT LAUDERDALE, FL 33309 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and little if applicable \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE ALEXOPOULOS, LANA NAME STREET ADDRESS 891 W COMMERCIAL BLVD FORT LAUDERDALE, FL 33309 CITY-ST-789 000000553397 05/15/06-80050-007 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TATLE STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with

SIGNATURE: 9

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY -ST - ZIP

SIGNATURE AND TYPED OF PRINTED